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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/670,952	
	Filing Date	September 25, 2003	
	First Named Inventor	Schafer et al.	
	Art Unit	3644	
	Examiner Name	Stephen A. Holzen	
Total Number of Pages in This Submission	10	Attorney Docket Number	7784-000609

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard		
<table border="1"><tr><td>Remarks</td><td>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.</td></tr></table>			Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name	Scott T. Gray	Reg. No.	48,891
Signature					
Date	January 21, 2005				

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Scott T. Gray	Express Mail Label No.	EV 327051035 US
Signature		Date	January 21, 2005

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Client Ref. No. 02-1408(012537)
Attorney Dkt. No. 7784-000609

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Schafer et al.

Serial No: 10/670,952

Filed: September 25, 2003

For: Cabin Services System For
Mobile Platform

Art Unit: 3644

Examiner: Stephen A. Holzen

AMENDMENT

Commissioner of Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action mailed December 16, 2004, please amend the application as follows and consider the remarks set forth below.

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 6 of this paper.

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